

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE   |
|---------------------------|----------|--------|--------|
| FEE DETERMINATION         | By       |        | 9-6-00 |
| O.I.P.E. CLASSIFIER       | SVI      |        |        |
| FORMALITY REVIEW          |          |        |        |
| RESPONSE FORMALITY REVIEW |          |        |        |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date     |
|----------------|----------|
| Final Original |          |
| 1              | 10/15/00 |
| 2              | 4/2/01   |
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| Claim          | Date   |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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